PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/445,289			ing Date 11/2000	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
FOR			NUMBER FIL	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A			N/A		
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A		N/A			N/A		
EXAMINATION FEE (37 CFR 1,16(o), (p), or (q))			N/A		N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•		X \$ =		OR	X \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		*		X \$ =		1	X \$ =		
	APPLICATION SIZE 37 CFR 1.16(s))	FEE i	sheets of pap s \$250 (\$125 additional 50 :	er, the applica for small entit sheets or fract	vings exceed 100 ution size fee due by) for each tion thereof. See 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	05/18/2012	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	- 21	Minus	·· 59	= 0	l	x s =		OR	X \$60=	0	
	Independent (37 CFR 1.16(h))	· 6	Minus	26	= 0	1	X \$ =		OR	X \$250=	0	
	Application Size Fee (37 CFR 1:16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
L		CLAIMS REMAININ AFTER AMENDME	NG	HIGHEST NUMBER PREVIOUSL' PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
ä	Total (37 CFR 1,16())	*	Minus	*	=	l	× \$ =		OR	X \$ =		
№	Independent (37 CFR 1.16(h))		Minus	***	-	1	x \$ =		OR	x s =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))]						
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))								OR			
* If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							-	OR	TOTAL ADD'L FEE		
** 10	"If the entry in column 1 is less than the entry in column 2, write 0 'in column 3. "If the "High and Number Provincing Place For N.T.HIS SPACE is less than 3.0; enter 20. "If the "Highest Number Provincing Place For N.T.HIS SPACE is less than 3, enter 3. "If the "Highest Number Provincing Place For N.T.HIS SPACE is less than 3, enter 3.											
The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S. 0.122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, motivaling qualiform, preparing, and submitting the completed application from the USPTO. The material way depending upon the individual case. Any comments on the amount of time you require to complete this collect application from control or the confidence of the complete the complete